HOLLI WOOD,				
Current Ma	iling Address:			
	DR ISLANDS DR DD, FL 33019			
FEI Number: 65-1057071		Certificate of Status Desired: No		
Name and A	Address of Current Registered Agent:			
SUITE 900	DA LAW PLLC INDALE BEACH BLVD. FL 33009 US			
The above name	d entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of F	lorida.
	d entity submits this statement for the purpose of changing its reg E:BURTON F. LANDAU	istered office or regis	tered agent, or both, in the State of F	lorida. 04/24/2019
		istered office or regis	tered agent, or both, in the State of F	
SIGNATURI	E: BURTON F. LANDAU	istered office or regis	tered agent, or both, in the State of F	04/24/2019
SIGNATURI	E: BURTON F. LANDAU Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of F	04/24/2019
SIGNATURI Officer/Dire	E: BURTON F. LANDAU Electronic Signature of Registered Agent			04/24/2019
SIGNATURI Officer/Dire	E: BURTON F. LANDAU Electronic Signature of Registered Agent	Title	STD	04/24/2019
SIGNATURI Officer/Dire Title Name	E: BURTON F. LANDAU Electronic Signature of Registered Agent Cotor Detail : PD GREEN, AMANDA 980 HARBOR ISLANDS DR	Title Name	STD DWECK, ARIANE 980 HARBOR ISLANDS DR	04/24/2019
SIGNATURI Officer/Dire Title Name Address	E: BURTON F. LANDAU Electronic Signature of Registered Agent ector Detail : PD GREEN, AMANDA 980 HARBOR ISLANDS DR	Title Name Address	STD DWECK, ARIANE 980 HARBOR ISLANDS DR	04/24/2019
SIGNATURI Officer/Dire Title Name Address City-State-Zip:	E: BURTON F. LANDAU Electronic Signature of Registered Agent Cotor Detail : PD GREEN, AMANDA 980 HARBOR ISLANDS DR HOLLYWOOD FL 33019	Title Name Address	STD DWECK, ARIANE 980 HARBOR ISLANDS DR	04/24/2019

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMANDA GREEN

City-State-Zip: HOLLYWOOD FL 33019

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/24/2019

FILED Apr 24, 2019 Secretary of State 4577270615CC

Current Principal Place of Business: 980 HARBOR ISLANDS DR HOLLYWOOD, FL 33019

ASSOCIATION, INC.

DOCUMENT# N0000006725

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: ADMIRAL'S COVE TOWNHOMES AT HARBOR ISLANDS

Date